FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAG	Re	set Form	FORM DR-2	DISCLOSURE 1) REPORT
COMMITTEE NAME (Must be same as on Statement of Organ	nization)		(Rev. 07/2004	
Appel for Senate			Comm. #	1403
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) (4) County Central Committee (5) County Candidate (6) City Candidate (8) County PAC (9) City PAC (10) Subdivision PAC (11) Local Baltot Issue CANDIDATE COMMITTEES ONLY: Candidate Name Stac. Age Office Sought State Secretar	lete / 7 School Board of	licable) House)	Scanned Computer Audited Late reports	20
SIGNATURE OF PERSON FILING REPORT				(3)
I AM FILING A October 39, 3010 (report date)	_REPORT FOR (1) EL	LECTION $I(2)$)NON-ELECTIC	
CHECK IF AMENDMENT TO REPORT DATED				er Date of Election
Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.	f Dissolution Form DR)	-3. Coun	ity & Local Comm n Election is held	ittees, enter County in
STATEMENT	OF CASH ON HA	AND	•	
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is fire.)	tal of all funds held by ash on hand at the end st report filed.)	the d	804	9.61
				~ ~ 1
Schedule A: Cash Contributions total (Attach Schedule	ule A) (*also see in-kind	d below)	<u></u>	248.
Schedule F: Loans Received total (Attach Schedule	r)			
Schedule H: Total Sales of Campaign Property (Atta	ch Schedule H)		<u> </u>	
(Schedule H applies to Candidates' Com	<u>mittees Only)</u> S	UB-TOTAL	\$ 19.3	192. ⁰⁵
SUBTRACT TOTAL MONEY SPENT THIS PERIOD				., 73
Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and	loans below)	39/	6, '-
Schedule F: Loan Repayments total (Attach Schedu	le F)		<u> </u>	}
and of this reporting period (if final rel	port balance must		110	75 3a
be zero) (Attach DR-3)	*************************		\$ <u>_/_\</u> @	12.
**UNPAID BILLS (From Schedule D - Attach Schedule D)			\$ <u> </u>	- 00 00 ·
**UNPAID BILLS (From Schedule D - Attach Schedule E - Attach Sched	edule E)		\$ /00	, 033. [~]
**OUTSTANDING LOANS (From Schedule F - Attach Schedu	ule F)			-
CONSULTANT BREAKDOWN (Schedule G Attached?)				YES NO
COMPONIAL DISTRIBUTION (COMPONIC COMPONIC COMPONICACIÓN CO				

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

FORM

\$ <u>3150</u>, "

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)		(1.00.0.00)	
(annually continues a potential range)	_	CHE	CK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)	· ·	AME	NDING FORM
Appel for Senate			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF 1D NUMBERS IS AVAILABLE FROM THE IQWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10-15-10	ID# CK#	Peter Mc Kown PO Box 100550 Denver CO 20350		\$ 500.°°	
10-15-10	ID# CK#	Jim Hoas 163 Rospect Avenue Son Francisco CA 94110		100°.	
10-15-10	ID# CK#	Batara Mongameli 18144 Jasey Trail Ackwath, IA 2001		100,00	
10-15-10	ID# CK#	Marcin Vanuyk 1809 W. Salem Ave. Indiando, IA 50125		30,°°	
10-15-10	ID# CK#	Robert Josten 201 Grand Suite 3900 Des Maines, IA 50309		200°00	V
10-15-10	ID# CK#	Julie Haggerty 9916 Tanglelood Dr. Des Mains, IA 50300		∞,∞	
10-15-10	id# 6133 ck# 1075	South Central Iour Federation of Lobor 2000 Walker Des Moines, IA 50317		/50, [∞]	
10-16-10	CK# 940.1	Des Moines, IA 50317 United Steel Worker of America 105 NW Broadway Des Moines, IA 50313		000.°°	
10-16-10	ID# CK#	Richard Lyford 699 Wolnut Site 1600 Des Manes IA 50309		100.00	
10-16-10	ID#	Knisti Perton 109 S Kenwood Blud. Indianob IA 50105		10.°°	
			SUB-TOTAL	17/0°	1

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of 6

TOTAL (if last page of this schedule)

SCHEDULE

(Rev 07/03)

MONETARY

RECEIPTS

Research to the

CONTRIBUTIONS - MONEY TAKEN IN

(michigani) co	in icincience a b	CIONIES ICHOO)			
COMMITTEE NAM	ME (Must	be same as on	Statement	of Organizati	ion)
		Senite			

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLLIMIN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE KYWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	William Brand		\$ 00	
10-17-10	CK#	6707-77* Lane Indiando, IA 50105		\$100,00	
	ID#	Kolman Wolton 400 E. 15th Ave.		~ v	
10-17-10	CK#	Indiando, IA 5005		SS.	
	ID#	Norman Radges 217 IV. IN Asse.		25,00	
10-17-10	CK#	Wintered IA 50073		₩,	
	ŧD#	Jon Vernon HOI W. Ashbad		m 00	
10-17-10	CK#	Indianob, IA 50135		100.	
	ID#	John Kibbie PO Boo 190		100,00	
10-17-10	CK#	Emmetslarg, IA 50536		100,	
	ID#	Duglos Kings Dry 13491 Hurt 69		m 00	
10-17-10	CK#	New Virginia IA 50010	<u> </u>	100,	L
	ID#	John Lieba 603 E. Solem Ave.		50.	
10-17-10	CK#	Indianob, IA 5005		30,	
0710	ID#	Grea Michels 818453434		50,00	
10-17-10	CK#	West Oss Moins ITA 50065			
12 17 12	ID#	Shirley Beakler 1015 Sept Fellon Rd.		50.00	
10-17-10	CK#	Indianole, IH SOLD			L
10.17.10	ID#	Pamila Deidemann 4055.164 Aue.		10.00	
10-17-10	CK#	Winterst IA 50071	OUD TOTAL		
			SUB-TOTAL	5600°	1

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surmame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions.	See Back o	f Form
	OCC LICEN V	1 1 VIIII

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Accel for Serote

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IQWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUNID- RAISER INCOME
10-17-10	CK#	Alicia Claypool 5754 Golley Cout West Oss Mains, IA 50866		\$350.°°	/
10-17-10	ID#	John Lasen 1412 Country Club Rd. Indianolo, IA 50125		20,00	
10-17-10	ID# CK#	Adele Botes 3706 E.J& St. Oss Maines IA 50317	·	<i>1</i> ∞, ∞	
10-17-10	ID# CK#	Shirley Aldeman 3862 Martin Lone Itaux City IA 52240		/00.116	
.10-17-10	CK# 1088	CGI Technologies of Solutions 11305 Randorf Hills Road Fairfox VA 00000		300,00	
10-17-10	CK#	June A. tahlenhomp 4206 5 Ave. Maline IL 61065		100.00	~
10-17-10	ID#	Water County Democroits P.O. Box HTTI Indonate, IA SOIDS		400.44	
10-17-10	ID# CK#	Andrew Sendoll 23 Water Grant St. #11C New York, NY 10701		1000.00	
10-18-10	ID#	Probert Storeholf 7780 N Merrie Lane Fox Point WI 53817	·	100.00	
10-18-10	ID# CK#	Terrence Mack 35 Bethune St. Apt. 2B Naw York NY 10014	SUB-TOTAL	250.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 6

TOTAL (if last page of this schedule)

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)	
COMMITTEE NAME (Must be same as on Statement of Organization)	·
Appel for Senate]

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE KYWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	VIFFOR FUND- RAISER INCOME
	ID#	Java Denocratic Paty 5061 Flau-Drive	·	\$ 00	
10-19-10	CK#	5661 Fleu-Drive Des Moines IA 90321		300.	L
	ID#	Caralyn Erb 1403 Apple Ori		_ 00	
10-19-10	CK#	Induction In SOIDS		50.	L
	ID# GAIH	Howkeye Lober Careil AFL-CIO 1211 Wiley Blud SW		2 00	
10-19-10	CK# 1050	Cedar Roods, IA SOHOY		2000.°°	L
	ID#	Chudia, Petht			
10-19-10	CK#	1515 Highwan Lr. Des Morres, IA 50315		100,00	
	1D# 97H8	Midwest FAC 1636 NW IMM St.		00	
10-19-10	CK# 1198	Clive, IA 50305		300,	<u> </u>
	ID#	Shari Fitzgerald		100 00	
10-19-10	СК#	706 11.34 tst. Fort Odge, IA 50501		/00,°°	<u> </u>
	ID#	TI CIL		00	
10-19-10	CK#	3004 SW. 37" St. Os Moines, IA 50321		50,	<u> </u>
	ID#	Strok Gold		1000	
10-20-10	CK#	1300-HMMS. Os Mones, IA 50811		100.	
	ID#	1 Lown Ricketts	,	2000	c
10-91-10	СК#	1615 W. Rosdall Urive Chicago, IL 60660		9000	<u> </u>
	ID#	Margret Wees		00	1
10-91-10	CK#	4819 Waterbury Rd. Des Moines IA 50312		50.	
	<u></u>		SUB-TOTAL	s4950.	.

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surmame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of 6 (for Schedule A)

TOTAL (if last page of this schedule)

CONTRIBUTIONS - MONEY TAKEN IN

ro candidate's personal funds)

(Includi	ng candidat	e's personal funds	
COMMITTEE	NAME (M	ust be same as	on Statement of Organization)
		Senate	

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DDYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
•	ID# 6907	Home Buildes Asson Greater Des Maines 6751 Corporate Or:		\$/00,00	
10-91-10	CK# 1098	Jahnston, JA 50131			
01-16-01	CK#	Minan Typon H350 Hoff Rood Waterloo, IA 50701		25. °°	<u></u>
10-21-10	ID# CK#	Craig Graziono 50044 M St. Des Mones IA 50312		92' oo	
10-32-10	ID#	Roger Foelske 904 Sunset Dr. Indianolo, IA 50125		100,00	/
10-20-10	ID# CK#	Virginia Rowen 3404 Cracker St. Des Moines, IA 50312		35°°°	V
10-00-10	ID#	Andrew Holleck 2007 - 47 "St. Des Moines, IA 50310		50, [∞]	
10-20-10	ID# CK#	Patricia Buck 1007 North E St. Indonolo, IA 50105		35.°°	
10-33-10	ID# CK#	Hortung + Schroede LLP 608 Lollet St., Ste. 100 Des Moines, IA 50309		/00.00	
10-25-10	ID#	Eller Susman 2007 Kirby Drive, Suite 603 Houston, TX 77019		300,0	
10-26-10	ID#	Brad Sears 2036 Alvardo Street Los Angeles CA 90039		50,00	
		4	SUB-TOTAL ge of this schedule)	\$900.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

For Instructions, See Back of Form CONTRIBUTIONS — MONEY TAKEN IN		SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
(including candidate's personal funds)		CHE	CK THIS BOX II NDING FORM
COMMITTEE NAME (Must be same as on Statement of Organization)			
STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITIC	AL ACTION COMMITTEE	LIST THE PAC ID	ENTIFICATION AND CAMPAIGN

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
•	1D# 9096	I. B. E.W. Edicational Committee 900 Sawth St. NW Workington, D.C. 20001		\$ 150	
10-26-10	CK# 01611	Washington D.C. 20001		750,	
	ID#	4			
	CK#				L
	ID#				
	CK#				L
	1D#				
	CK#				<u> </u>
	ID#				
	ск#				<u> </u>
	ID#				
	CK#			İ	<u> </u>
	ID#				
÷	CK#				<u> </u>
	ID#				
	CK#				<u> </u>
	ID#			1	Ī
	CK#				<u> </u>
	ID#				1
	CK#				
	CIVE		SUB-TOTAL	\$750.00	+

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surmame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
В	M
(Rev. 07/03)	EXF

MONETARY EXPENDITURES

LI CHECK THIS BOX IF AMENDING FORM

COMMITTEE	NAME	(Must be	same as on	Statement of Organization)
Accel	F	· Sen	ate	

THE	1 10 Ser	110			
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPO (DESCRIBE TRA		AMOUNT EXPENDED
10-17-10	CK# 1453	Winis Pizzod Stakhoxe 188 W. Ashkad Indiando, IA 50185	Pizzo & sta	entrally	\$ 100.00
10-18-10	ID# CK#	Act Blue Technical Sources P.O. Box 382110 Cambridge, MA 08038	contribution to	e	. 40
10-18-10	ID# CK#	Notional Bankcod System 2000 Vic Fortung ST Blog. #1, Site 240 Austin TX 78746	tes for process	siq	306.
10-30-10	CK# 1H2H	Jame Wolfen 1007 Angelo Drive Indianals, IA 50185	fundacise	brunch	191.16
10-21-10	CK# HSS	Stoci Appel 10901-180 d Ave. Acknown IA 50001	rembusement for: office telephones pizza a sonducties for voluntres	₹106,¢¢ 94, ⁹³	J00,92
0H601	CK# 1456	Eden Company 200 Teith 5th., 5th Floor Des Maires, I.A 50309	senate neighbord reighbor mail		1347.14
10-35-10	ID#	Mid American Energy PO Box 8000 Oavenport, IA 50008	dyfilite ylltrom		19.09
10-26-10	CK# 1H58	Staci Appel 10701-120 Ave. Acknown, IA 50001	reimbursment to the for voluntees cobleties forbille mileage reimbursem 343 h. L. o. SO4	- 1 006, 6	H30,76
				SUB-TOTAL	\$2596.09

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

	ŧ		·
Page		of	9

\$

TOTAL (if last page of this schedule)

	-
WEST CONTRACTORS	
等。 (4) 第一次 (4) 第一次	
EAST-STOCKER BLASSESSES	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

SCHEDULE
В
(Rev. 07/03

MONETARY EXPENDITURES

CHECK THIS BOX IF AMENDING FORM

HP	pel ter D	enate		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID#	Famme Walton	•	
1026-10	CK# 1459 CK# 1460	Jaconne Walton 1007 Argels Dr. Indianolof IA 50105	stamps recipe cords	\$ 140.44 RO.20
	ID#	Cote Printing	505 50 000 5	
10-36-10	CK# IHGO	Costor Printing 1739 East Good Ave. Des Maines, IA 50316	reape ca as	180.00
-	ID#			
	CK#			
	ID#			
	CK#		,	
	ID#			
	CK#			·
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTAL	\$300 64
			TOTAL (if last page of this schedule)	\$1916,73

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page Q of Q

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM	SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS	
COMMITTEE NAME (Must be same as on Statement of Organization) Appel For Senate	Reset Form	CHEC	K THIS BOX IF DING FORM

DATE RECEIVED	NAME AND ADDRESS	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
(MM/DD/YR)	OF CONTRIBUTOR	(ii diparent)	media by	\$	
10-15-10	Java Senate Mojerty Ford Stabl Fleur Drives Des Moines IA 50301		media ay	30,000,00	
10-19-10	I ama Sanate Majority tond		wego pin	61,600.00	
10-19-10		 			[]
01-16-01	Jour Sorok Majority Fund Jobs Heur Drive Des Mailles, IA 50301		wagio ph	10,000 °C	
10-20-10	Javo Senate Majority Fund		brogneyieu wegid	4600,00	
10-00-10	1 /- 10/2 had 1 tot 30.571				
014601	Pat Nowin. 2460 Araineview Arce. Whiterest IA 50073		venetabez	\$7.00	
	Jame Walton, 1027, Angela Orive Indiando IA 50125		newspapers	6.00	
10-34-10	Indiana IA 50125		\		
					ļ
			SUB-TOTAL	106,333.	ω
			TOTAL (if last page of this schedule)	106,033.	3
			es in kind contribution to t	ne Page	of

"Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If summane of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____of ____

If estimated, show est beside figure.	TAL VALUE CAMPAIGN PROPERTY THIS REPORT #) SC	-		3-5-10 Mac Back Ao	S-05-06 Compose Compose	Date Purchased (Schedule B) or Data Received Description of Property (Schedule E) (MIN/DD/YR)	ART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY	COMMITTEE NAME (Must be same as on Statement of Organization)	IS FORM IS USED BY CANDIDALES
	THIS REPORT #3/5C			\$343. 343.	*989. H3	Purchase Price or Est. Value When Acquired*	OF CAMPAIGN PROF	s on Statement of Organizatio ਸੀਵ	ANDIDA ES COMO
	8			, COO,	\$/\$\infty\.	Current Value at Feir Market This Report Current Date (MM/DD/YR)	PART II -	n)	COMINII I EES ONET
(Attach Additional Schedules if Needed)	** PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$					Name and Address of Purchaser/Dones	SALES OR TRANSFERS OF CAMPAIGN PROPERTY **		
Page	T(Description of Property	PROPERTY **	Reset Form	
(For Schedule H)	TOTALS \$					y Soid? Sais	AMENDING FORM	ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED	(Rev. 07/03) PR
	s					Value of Donation	IS BOX IF FORM	DULE H TO T, MAKING REQUIRED.	PROPERTY